POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM
Extraction Form
Indication Indication

INDICATION FORM	Art Unit			
	Examinor Name		***************************************	
	Attorney Docket Number			
I hereby revoke all previous powers of attorney g	iven in the ahove identified ann	Scation		
I hereby appoint.				
Precisioners associated with the Customer Number.	29,689			
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Trademark Office connected therewith.				
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Applicant/Invertor.	R 3.71. (PTO/S696)			
	Applicant or Assignee of Record			
Signatura Singilari	2	Date	08/21/2008	
Same Giorgio Bridhi	· · · · · · · · · · · · · · · · · · ·	Telephone	100.2112000	
Title and Company				
NOTE: Signatures of all the lovershire or easigness of record of the en against as acquired, our pelow".	thu miseast or their representative(s) are requ	ired. Solved mo	Sipis forces if more than one	
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